

Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 1-5-2014

Address: 1720 East 400 South

Incident #: 14ISPC000087

Knox Indiana 46534

County: Starke

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☒ Other: Detached Garage

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ One Pot or Birch Reaction(s): Detached Garage
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Hydrochloric Acid Gas Generator(s): Detached Garage
☐ Flammable Solvents: _____
☒ Water Reactive Metal (Lithium): Detached Garage
☒ Anhydrous Ammonia: _____
☒ Corrosive Acid: Detached Garage
☒ Corrosive Base: Detached Garage
☐ Other (item and location): _____

Vehicle Information:

Owner: N/A

Make:

VIN:

Model:

Year:

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often

Living conditions of home: ☐ clean ☐ disarray
☐ unclean

Estimated length of time manufacturing had been occurring: _____

Additional Information: _____

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department City, Township or County Bass Lake/Calif VFD

Fax: 574-772-3388

Health Department County: Starke Health Department

Fax: 574-772-8035

Department of Child Services Hotline: deshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: S/TRP TSCHIDA PE 7117 Phone 219-696-6242

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.